



The Indiana Family and Social Services Administration

2015 – 2018 Aging State Plan

Division of Aging

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Building the Aging State Plan

- How are we going to strengthen the state of Indiana in the next five years?
- How do we continue to grow and develop our partnerships to meet a very diverse aging population?
- How do current older adults, their families and caregivers, and the “silver tsunami” on its way, know about us?
- How do we promote ourselves as an aging network, our service providers, and the programs and resources we offer?
- How do we ensure a consistent message throughout the state while trying to narrow down—but not totally eliminate—buzzwords?



We asked other experts...

- Indiana Association of Area Agencies on Aging (I4A)
- CHOICE Board
- Indiana Commission on Aging
- Three public hearings throughout the state
- Community Assessment Survey for Older Adults (CASOA)
 - Overall Community Quality
 - Community and Belonging
 - Community Information
 - Productive Activities
 - Health and Wellness
 - Community Design and Land Use



Overall Goals

- Enhance the capacity of the provider network to provide quality care programming while ensuring responsible stewardship of public monies.
- Strengthen the rights of Hoosiers to self-determination in their long-term services and supports, regardless of their position on the financial spectrum.
- Create a statewide focus on the need of family caregivers.
- Assess and facilitate statewide community readiness for a growing older population.
- Strengthen statewide systems for advocacy and protection for older adults.



Goal #1

- Enhance the capacity of the provider network to provide quality care programming while ensuring responsible stewardship of public monies.
 - ADRC Terminology Survey
 - Person-centered cost-effective service delivery models
 - National Core Indicators – Aging and Disability
 - Objectives
 - 1.1 – Collaborate on strategic planning/AAA culture change
 - 1.2 – Work with AAA network to identify and promote sustainable, cost-effective, person-centered service delivery models
 - 1.3 – Person-centered service options, regardless of financial need
 - 1.4 – Workforce development and culture change initiatives



Goal #2

- Strengthen the rights of Hoosiers to self-determination in their long-term services and supports (LTSS), regardless of their position on the financial spectrum.

- Person-centered care	- <i>Indiana Culture Change Coalition</i>
- Community Living Project (CLP)	- Educating younger adults on long-term care planning
- Care Transitions	- High-Performing LTSS System

- Objectives
 - 2.1 Develop systems, tools, and expectations that focus on delivering person-centered care
 - 2.2 Educate Hoosiers on the importance of advance planning
 - 2.3 Collaborate with ISDH and nursing facility professionals to promote culture of person-centered care for those residing in institutions



Goal #3

- Create a statewide focus on the needs of family caregivers
 - Family Caregiving Coalitions
 - Lifespan Respite Care Program
 - National Caregivers Month (November)
 - Maximizing capability training for caregivers of persons with dementia
 - Evidence-based caregiver trainings
 - *Moving Indiana Forward*
 - Objectives
 - 3.1 Develop a state plan on supporting caregivers
 - 3.2 Increase awareness of services already available to support caregivers
 - 3.3 Promote caregiver training that maximizes the abilities of caregivers to care for persons with Alzheimer's Disease and Related Dementias (ADRD)



Goal #4

- Assess and facilitate community readiness for an expanding and diverse older population with a multiplicity of needs.
 - Community readiness: a system of service needs
 - Engaging older adults
 - Lifelong Indiana Coalition
 - Identifying existing replicative programs
 - Disseminating community information to older adults
 - Mental health and aging
 - Objectives
 - 4.1 Foster engagement of older Hoosiers in their communities
 - 4.2 Advocate for older adults' needs in community planning process
 - 4.3 Elevate awareness of older adults at risk for mental health and substance abuse issues, including suicide



Goal #5

- Strengthen statewide systems for advocacy and protection for older adults.
 - Public safety workforce trainings on ADRD
 - World Elder Abuse Awareness Day (June 15, 2014)
 - Over 7 million older adults – 20% of older Americans – have been victimized
 - Consumer education on fraud/scams
 - Objectives
 - 5.1 Improve APS data collection and operational systems
 - 5.2 Improve APS integration into the aging network
 - 5.3 Increase focus on recognition and prevention of financial exploitation



Home and Community Based Services “Final Rule”

- The “Final Rule” applies to all Waiver Services -1915(c), 1915(i) and 1915(k) with the intent of assuring that Home and Community-Based Services offer the same experiences as an individual living at home, in the community.
- Looked at from another perspective – that home and community based services do not provide an institution-like experience



Implementation

- Implementation will be phased in over several years
- The State will be required to develop and implement a transition plan.
- The Rule requires public input be sought at almost every step



An Emphasis on “Settings”

- While all HCBS services are subject to the Rules, you can expect that residential-based services will be the most highly impacted.
- The State will be working with Adult Family Care and Assisted Living providers to work towards compliance, or to demonstrate to CMS that our settings truly are compliant.
- The State will need to develop monitoring systems to assure that requirements of the Final Rule are maintained over time.



Characteristics of a “Compliant” Setting

The Home and Community-Based setting:

- Is integrated in and supports access to the greater community
- Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources
- Ensures the individual receives services in the community to the same degree of access as individuals not receiving Medicaid home and community-based services



Compliant Settings, cont'd

- Is selected by the individual from among setting options, including non-disability specific settings and an option for a private unit in a residential setting. Person-centered service plans document the options based on the individual's needs, preferences; and for residential settings, the individual's resources
- Ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint



Compliant Settings, cont'd

- Ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint
- Optimizes individual initiative, autonomy, and independence in making life choices
- Facilitates individual choice regarding services and supports, and who provides them



Additional Requirements

- Specific unit/dwelling is owned, rented, or occupied under legally enforceable agreement
- Same responsibilities/protections from eviction as all tenants under landlord tenant law of state, county, city or other designated entity
- If tenant laws do not apply, state ensures lease, residency agreement or other written agreement is in place providing protections to address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law



Requirements, continued

- Each individual has privacy in their sleeping or living unit
- Units have lockable entrance doors, with the individual and appropriate staff having keys to doors as needed
- Individuals sharing units have a choice of roommates
- Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement



Requirements, continued

- Individuals have freedom and support to control their schedules and activities and have access to food any time
- Individuals may have visitors at any time
- Setting is physically accessible to the individual



“Prohibited” Settings

- Settings in a publicly or privately-owned facility providing inpatient treatment
- Settings on grounds of, or adjacent to, a public institution
- **Settings with the effect of isolating individuals from the broader community of individuals not receiving Medicaid HCBS**



“Person-Centered” Emphasis

- There will be increased requirements for Person-Centered Planning, but this will largely be on the State and Case Management to implement.
- **CMS will be offering “guidance” to States on this and non-residential services in the coming months.**



Training Evaluations Forms

Thank you for participating in today's sessions!!!

Please take some time to complete an Evaluation Form
and we will collect these at the door.

All Presentations will be posted on-line at

<http://www.in.gov/fssa/da/3954.htm>

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